Black Women and HIV: A Thriving Epidemic

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Presentation Overview

- Prevalence rates of HIV
- Racial, ethnic and gender differences in HIV prevalence
- Factors that contribute to surveillance data differences
- Physical and Psychological effects of HIV
- Current physical and psychological treatments
- Implications for current research
HIV Prevalence

- Worldwide estimates of HIV prevalence range from 33.2 million to 40 million (Zarocostas, 2007)

- Women, oppressed ethnic minorities, and impoverished groups are currently suffering the greatest impact of HIV worldwide (Whetten, Reif, Whetten, & Murphy-McMillan, 2008)
Difficult to capture accurately due to lack of reporting and non-diagnosis status of individuals who have not initiated testing (CDC, 2009)

Approximately 1.1 million adults are currently living with HIV in the United States (Long, Brandeau, & Owens, 2009; CDC, 2009)
Women represent the fastest growing portion of HIV infected individuals in the US (Edwards, 2006).

An estimated 278,400 (CDC, 2009) to 300,000 women (over the age of 13) are living with HIV in the United States (Long et al., 2009).
AIDS Rates for Female Adults and Adolescents Reported in 2007—United States and Dependent Areas

*Rates were not calculated for areas reporting fewer than 5 AIDS cases in females in 2007.
AIDS Cases among Female Adults and Adolescents Attributed to Injection Drug Use or High-Risk Heterosexual Contact, by Region, 2003–2007—50 States and DC

Note. Data have been adjusted for reporting delays and missing risk-factor information. *Heterosexual contact with a person known to have, or to be at high risk for, HIV infection.
Racial and Ethnic Disparities

- Black women represent 66% of all of the newly diagnosed HIV cases among women (Gilbert & Goddard, 2007; King et al., 2008; Rose et al., 2008)
Ethnicity and Regional Data Combined

Reported AIDS Cases among Female Adults and Adolescents, by Region and Race/Ethnicity, 2007

50 States and DC

- **Black/African American**
- **Hispanic/Latino**
- **White**

Region No. of cases

- Northeast: 1,553 (N=2,799)
- Midwest: 635 (N=938)
- South: 3,734 (N=4,944)
- West: 343 (N=991)

Region totals include 131 females of unknown race or multiple races.

*Hispanics/Latinos can be of any race.
Florida Prevalence

- In Florida, the number of people living with HIV and AIDS is one of the highest in the country (CDC, 2009)

- State-specific surveillance data indicate that rates of HIV infection are higher in Florida than the national average with approximately 83,041 people currently living with HIV in the state of Florida (CDC, 2009)
Black Women in Miami-Dade County

- The high prevalence trends continue within Miami-Dade county where Black women account for 75% of the HIV/AIDS cases in the county (Miami-Dade County Health Department, 2009)
Contextual Factors

High Prevalence

- Low SES
- Cultural Norms
- Oppression, racism & discrimination
- Interpersonal Factors
Low-income and poverty have been widely identified as risk factors for HIV transmission among Black women and restricts where Black women reside which limits access to quality medical care and services (Gentry, 2005)
Sexual Partners

- High-risk sexual partners
- Black women are more likely to be involved with men who have sex with men (MSWM) and to men who have sex with women (MSW) unprotected and/or have multiple partners (Lauby, 2008; Aidala, 2006)
What is the most common mode of HIV Transmission among Black women?

Are Black women engaging in risky sexual practices more than their White counterparts?
Gender and Power in relationships

- Male control over sexual practices (Sherman, 2000)
- Lack of condom use within female perceived monogamous relationships (Wagstaff, 1995)
Physical Effects of HIV

- Pain and Discomfort
- Opportunistic Infections
- Neurological Effects
Pain and Discomfort

- sore throat
- headaches
- muscle and joint pain
- dry cough
- skin rash
- night sweats

- shortness of breath
- yeast infection in mouth or throat
- enlarged lymph nodes
- weight loss
- skin discoloration (Ashton, 2005)
The immune system is damaged extensively (Portilla, 2007)

Increases in opportunistic infections are common and for women with HIV there is an increase in gynecological infections (Portilla, 2007)

Opportunistic infections affect the brain, eyes, mouth and throat, lungs, GI, skin and genitalia (AEGIS, 2001)
Neurological Effects

- Neurological difficulties increase
  - Headaches
  - Memory loss
- Impairments in short term memory and loss of balance

(Tambussi, 2000)
Psychological Effects

- Depression
- Anxiety
- Substance Abuse

Quality of Life
Depression

- Most common comorbid mental disorder among HIV+ individuals (Whetten, 2008)
- Black women with HIV experience higher levels of depression than their non-Black counterparts (Moneyham, 2000)
Depression

- Significant levels of depressive symptomatology among women have been linked to increased risk for suicide, increases in general distress, and are associated with a negative impact on family environment (Jones, 2001)
Stigma-related PTSD is more common among Black women with HIV in addition to PTSD based upon experiences of discrimination (Bird, 2004).

For Black women – Fear, guilt, shame and stigma contribute to anxiety (Miles, 2003).
Individuals with co-occurring HIV and substance abuse face increased difficulty with maintaining supportive social and familial networks and have decreased levels of involvement in medical treatment programs (Walkup, 2008).

HIV+ Black women suffer disproportionately from comorbid substance abuse (Amaro, 2001).
HIV Treatments

- **Medical Treatment**
  - Highly Active Antiretroviral treatment (HAART) is most common

- **Psychological Treatment**
  - Group psychotherapy has been found to be highly effective in the reduction of depressive symptoms (Ashton, 2005)
THANK YOU

If you would like additional information please contact me @ m.hobbs@umiami.edu
References


References


